## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
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				or <u>Fax</u> (5	71)-273-2885	Ÿ	00010-1-400		
INSTRUCTIONS: This is appropriate. All further conditioned unless corrected maintenance fee notification.	i below or directed of	therwise	in Block 1, by	(a) specifying a new corn	FION FEE (if requirements fees address	ifred). will be ; and/c	Blocks 1 through 5 : mailed to the current or (b) indicating a sep	thould be corresponded	completed where indence address as E ADDRESS" for
CORRENT CORRESPONDENCE ADDRESS (Note: Use Book 1 for any charge of address)  27955 7596 12/05/2011  TOWNSEND & BANTA Suite 900, South Building 601 Pennsylvania Ave., N.W. Washington, DC 20004					te: A certificate of r(s) Transmittal, There, Each addition	mailin is certi	g can only be used for ficate cannot be used to such as an assignment illing or transmission.	or domes	tic mailings of the
					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
		(Depositars nama j							
					Clignatures				
APPLICATION NO. FILING DATE				FIRST NAMED INVENTOR	***************************************	(Date)			
10/593,544 09/23/2007				Yukimitsu Suda			RNEY DOCKET NO.	CONFIRMATION NO.	
TITLE OF INVENTION: A		TOS-172-USA-PCT 4499 REVENTING EYE LENS MATERIAL							
APRIN TYPE	SMALL ENTITY	***********	suë fre due	7	<b>T</b>	······································			
Bonprovisional	NO	L	\$1740		PREV. PAID ISSU	1-888	TOTAL PEE(S) DUE		DATE DUE
EXAMINER				\$300	,50 1		\$2040	,	03/05/2012
REDDICK, MARIE L			ART UNIT	CLASS-SUBCLASS					
L Change of correspondence		o of "El		\$23-106000		<del></del>			
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA	TO BE	PRINTED ON T	THE PATENT (print or typ	e)			~~~	
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	an assignee is identi a 37 CFR 3.11. Comp EE	fied be letion o	low, no assignee I this form is NO	data wilf appear on the part a substitute for filing an (B) RESIDENCE: (CITY	itent. If an assigne	e is ide	entified below, the do	cument h	as been filed for
Shiseido Co, Ltd.					Tokyo Dapan				
Please check the appropriate	assigner category or	categor	ies (will not be pri	inted on the patent):	Individual A Con	poratic	m or other private grou	no emity	Clovernment
An. The following fee(s) are  Jasue Fee  Publication Fee (No so  Advance Order - # of	submitted; mall entity discount pr Copies	46	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 25 16 24 (enclose an extra copy of this form).						
5. Change in Entity Status  a. Applicant claims 53	(from status indicated MALL ENTITY status	above) : See 3							
NOTE: The Issue Fee and Pointerest as shown by the reco	iblication Fee (if requ rds of the United State	ired) wi	Il not be accepted it and Trademark	to Applicant is no long from any one other than the Office.	er craining SMAL. e applicant; a regis	ered at	TY status. See 37 CF1 torney or agent; or the	3 1.27(g) assignce	(2). or other party in
Authorized Signature	<u> </u>	John John John John John John John John	7,200				خ خ		***************************************
Authorized Signature Date North 4, 2012  Typed or printed name Donald E. Townsend Registration No. 22, 069  This collection of information is required by 37 CFR 1.31. The information is required to obtain or retain a benefit by the public which is to tile (and by the USP10 to an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is retain a benefit by the public which is to tile (and by the USP10 to									
This collection of information an application. Confidentialisabuntting the completed application and/or suggestions. Biox 1450, Alexandria, Virginia 22313-1	n is required by 37 CF ty is governed by 35 I plication form to the for reducing this burn his 22313-1450 DO 1 1450.	R 1.31 J.S.C. J USPTO len, she NOT SI	1. The information 122 and 37 CFR 1 1. Time will vary a udd be sent to the END FEES OR CO	n is required to obtain or re 14. This collection is esti- depending upon the indivi- Chief Information Officer OMPLETED FORMS TO	tain a benefit by the mated to take 12 m dual case. Any con U.S. Patent and T THIS ADDRESS.	public inutes t intents radema SEND	which is to file (and I to complete, including on the amount of time it Office, U.S. Depart TO: Commissioner fo	ny the US gathering you req iment of r Patents,	PIO to process) t, preparing, and uirs to complete Connuerce, P.O. P.O. Box 1450,

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